



Attorney's Docket No. LAZ1P001

COPY

residence, post office address and citizenship are as stated below next to my name.

lieve that I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint intor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the intion entitled: ARCADE GAME, the specification of which,

ck one)	1	is attached her	reto.				
CR 0,	2. <u>X</u>	was filed on O U.S. Applicati	Was filed on October 2, 1992 as U.S. Application Serial No. 07/956.057				
		and is amende	d herewith	•			
	3	was filed on_	PCT Applie	cation Serial No.		as	
		and was amer	nded on		·		
amended by an	y amendment r	eferred to above.		the above-identified spe			
le 37, CFR §1.	56.			to the examination of thi			•
	rate listed below	enefits under Title 35, ly and have also identifif the application on wh	led below s	es code, § 119 of any for any foreign application for is claimed:	oreign applic or patent or	ation(s) for print inventor's c	patent or ertificate
_					Priority I	Benefits Cla	imed?
ior Foreign A	pplication(s)	•		·	Yes .		
ppl. No.)		(Country)	(Date F	filed- Day/Month/Year)			
	:				Yes	No	•
ppl. No.)		(Country)	(Date I	Filed- Day/Month/Year)	<del>.</del>	—	
					_ Yes	_ No	
ppl. No.)		(Country)	(Date l	Piled- Day/Month/Year)			
hereby claim the sofar as the surface information	bject matter of rovided by the	each of the claims of the first paragraph of Title in Title 37. Code of F	his applicate 35, United ederal Regi	120 of any United State ions is not disclosed in to States Code, § 112, I ulations, § 1.56 which of this application:	acknowledge	e the duty to	disclose
rior U.S. App	lication(s)						
Application Se	rial No.)_	(Filing Date	e)	(Status - patented, pe	nding, aban	doned)	
Application Se	erial No.)	(Filing Dat	(c)	(Status - patented, pe	ending, aban	doned)	

00

237,388) as my principle attorney, to prosecute this application and to train the mark Office connected therewith:

Correspondence To:

Paul L. Hickman

HICKMAN & BEYER

P.O. BOX 61059

Palo Alto, California 94306

t Telephone Calls To:

Paul L. Hickman at telephone number (415) 328-6500

eby declare that all statements made herein of my own knowledge are true and that all statements made on nation and belief are believed to be true; and further that these statements were made with the knowledge that willful statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the statements Code, and that such willful false statements may Jeopardize the validity of the application or any patent ag thereon.

written Full Name of or First Inventor: BRYAN M. KELLY	Citizenship: USA
ntor's signature: Buyan m. Kelly	Date of Signature: 10-5-93
dence: (City)Dublin	(State/Country) California
Office Address: 8869 Bandon Drive, Dublin	California 94568
	•.
Name of Second Joint ontor (if any): NORMAN B. PETERMEII	Citizenship: USA
entor's signature: Norman B. Peterme	Date of Signature: 10-5-93
idence: (City) <u>Saratoga</u>	(State/Country) California
t Office Address: 14168 Okanogan Drive, Si	ratoga, California 95070
I Name of Third Joint entor (if any):  MATTHEW F. KELLY	Citizenship: USA
entor's signature: // / / / / / / / / / / / / / / / / /	Date of Signature: 10-5-93
sidence: (City) <u>Dublin</u>	(State/Country) California
st Office Address: 8869 Bandon Drive, Dubl	in California 94568
Il Name of Fourth Joint yentor (if any): J. RICHARD OLTMANN	Citizenship: USA
ventor's signature: (Signature Not Required	Date of Signature:
esidence: (City) Scottsdale	(State/Country) Arizona
, , , , , , , , , , , , , , , , , , , ,	Scottsdale, Arizona 85260
02f Office Vanices:	<del></del> .



(Kd.33-4/92 (Vb.603)



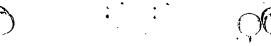
7 2004 (5)
ADEMANT
Attorney's Docket No. LAZ1P001
COMBINED DECLARATION AND POWER OF ATTORNEY
(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT, SUPPLEMENTAL, DIVISIONAL, CONTINUATION OR CIP)
As a below named inventor, I hereby declare that:
TYPE OF DECLARATION
This declaration is of the following type: (check one applicable item below)
⊠χ original
design
supplemental
NOTE: If the declaration is for an International Application being filed as a divisional, continuation or continua- tion-in-part application do <u>not</u> check next item; check appropriate one of last three items.
national stage of PCT  NOTE: If one of the following 3 Items apply then complete and also attach ADDED PAGES FOR DIVISIONAL,
CONTINUATION OR CIP.
divisional
continuation
continuation-in-part (CIP)
INVENTORSHIP IDENTIFICATION
WARNING: If the inventors are each not the inventors of all the claims an explanation of the facts, including the ownership of all the claims at the time the last claimed invention was made, should be submitted.
My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:
TITLE OF INVENTION
ARCADE GAME
SPECIFICATION IDENTIFICATION
the specification of which: (complete (a), (b) or (c))
(a) XX is attached hereto.
(b) was filed on as Serial No. 0 /
or Express Mail No., as Serial No. not yet known and was amended on(if applicable).
and was amended on

(Declaration and Power of Attorney [1-1]—page 1 of 4)





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	(Rd	1.53-8/	72 Pub.60	))			FOR	M 1	-1	,		1-8



### **POWER OF ATTORNEY**

I hereby appoint the following attorney(s) and/or agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith. (List name and registration number)

Paul L. Hickman

Registration No. 28,516

(check the following item, if applicable)

Attached as part of this declaration and power of attorney is the the above-named attorney(s) to accept and follow instruction	authoriz s from	atior my	re-
presentative(s).			

#### SEND CORRESPONDENCE TO

Paul L. Hickman Ten Almaden Boulevard Suite 1100 San Jose, CA 95113-2233 DIRECT TELEPHONE CALLS TO: (Name and telephone number)

Paul L. Hickman (408) 288-6500

#### **DECLARATION**

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

## SIGNATURE(S)

D-1-	Country of Citizenship U.S.A.	
Decidence	8869 Bandon Drive, Dublin, Ca. 94568	
Post Office A	idress same as above	
Inventor's sig	second Joint inventor, if any <u>Norman B. Petermeier</u>	
Inventor's sig	natureU.S.A.	
Inventor's sig	·	

(Declaration and Power of Attorney [1-1]-page 3 of 4)



(Rd.53-8/92 Pab.605)

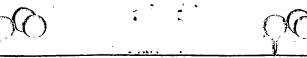


# CHECK PROPER BOX(ES) FOR ANY OF THE FOLLOWING ADDED PAGE(S) WHICH FORM A PART OF THIS DECLARATION

X	Signature for third and subsequent joint inventors. Number of pages added
	Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added
	Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 CFR 1.47. Number of pages added
	• • •
	Added pages to combined declaration and power of attorney for divisional, continuation, or continuation-in-part (CIP) application.
	☐ Number of pages added
	• • •
	Authorization of attorney(s) to accept and follow instructions from representative
	• • •
	If no further pages form a part of this Declaration then end this Declara- tion with this page and check the following item
	☐ This declaration ends with this page

(Declaration and Power of Attorney [1-1]—page 4 of 4)

FORM 1-1 1-1



FEB 1 7 2004 FEB 1

Full name of third joint inventor, if any	Matthew F. Kelly
Inventor's signature	
DateCount	
Residence <u>8869 Bandon Driv</u> Post Office Address <u>same</u> as ab	ve. Dublin. Ca. 94568
Full name of fourth Joint Inventor, if any	J. Richard Oltmann
Inventor's signature X Coun	Charles ( U.S.A.
Residence 7386 E. Paradise Post Office Address same as a	e Dr., Scottsdale, AZ 85260
Full name of fifth joint inventor, if any _ Inventor's signature	
Date Coun	
Residence	
Post Office Address	

(Added Page to Combined Declaration and Power of Attorney for Signature by Third and Subsequent Inventors [1-2])